

# Cherrytree Township

1311 Cherrytree Road

Titusville, PA 16354

Phone: 814 827-1078 Fax: 814 827-3579

Venango County

## Zoning Permit Application

**Property Owner(s) Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone #** \_\_\_\_\_

**Address for this Permit (if different than above):** \_\_\_\_\_

**Present Use of Property:** \_\_\_\_\_

**Estimate of Project Cost:** \_\_\_\_\_

**Description of Project:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that I am the applicant for a permit in Cherrytree Township, Venango County, Pennsylvania. I am the (circle one) owner, partner, contractor.

It is agreed that all requirements of the Zoning Ordinance, and other ordinances, laws and resolutions of the Cherrytree Township and Pennsylvania statutes governing building, construction, health, sanitation and safety will be complied with and no deviation from the plans and/or specifications shall be made without further approval from the Zoning Officer, or other applicable Township Board or Commission.

I hereby certify that the information contained in this application is true and correct to the best of my knowledge and will submit to the Township one (1) copy of all documents filed in compliance with building code, sewage, subdivision and/or land development regulations.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Stormwater Fee:** \_\_\_\_\_

**Zoning Fee:** \_\_\_\_\_ **Check #** (payable to Cherrytree Township) \_\_\_\_\_

**Permit number:** \_\_\_\_\_ (once approved)

OFFICE USE

**Application Received By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Comments:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

THIS PAGE FOR STAFF USE ONLY

*Site and Zoning Information*

**Property Owner Name:** \_\_\_\_\_

**Property Address:** \_\_\_\_\_

**Parcel Identification #:** \_\_\_\_\_

**Zoning District:** \_\_\_\_\_

**Date Signed/Approved:** \_\_\_\_\_

**Date Disapproved:** \_\_\_\_\_

**Reason for Denial:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Comments:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature of Zoning Officer:** \_\_\_\_\_

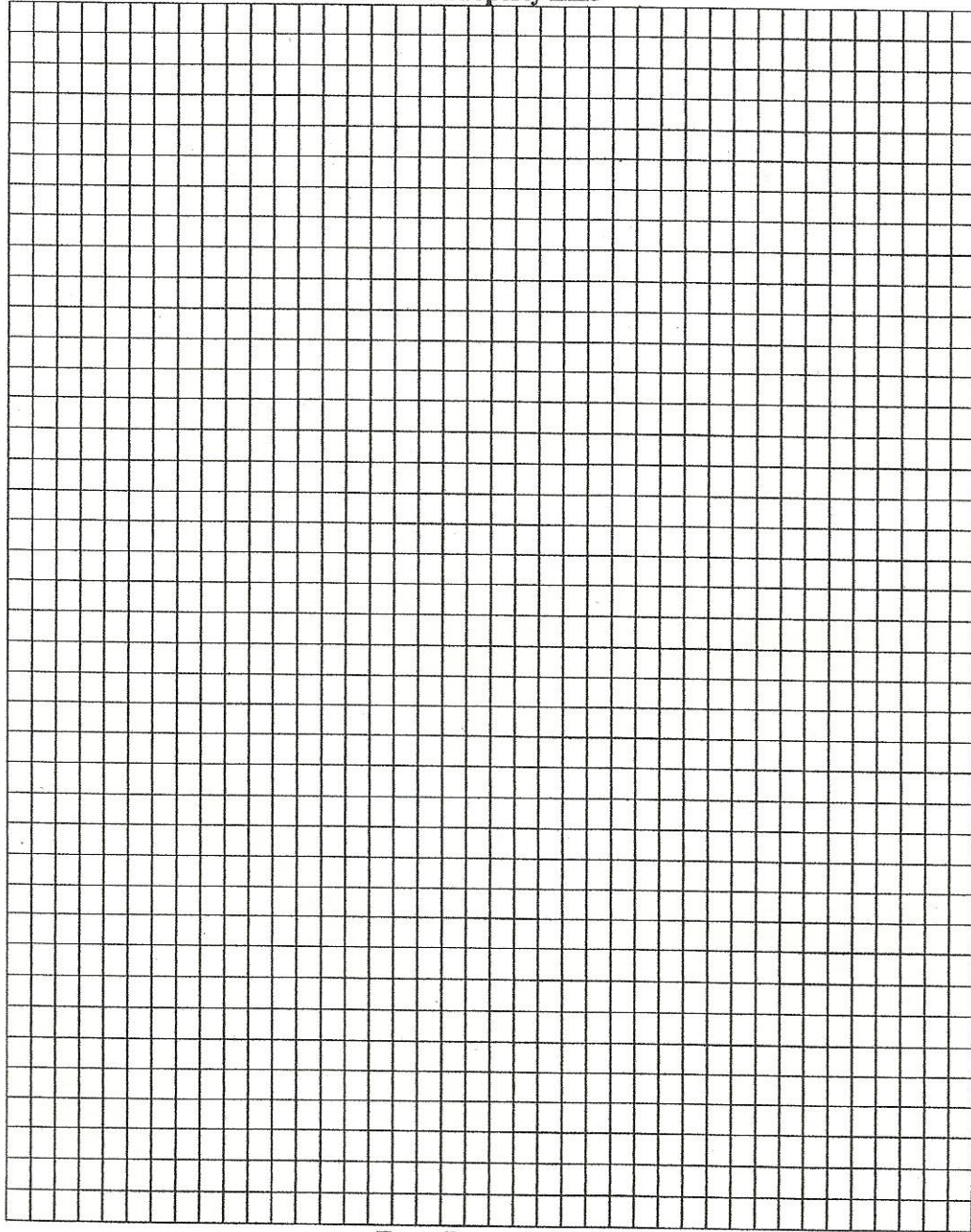
\_\_\_\_\_

# PLOT PLAN

*Please draw your proposed improvement in relation to property lines and existing structures on the property.*

1 square = approximately \_\_\_\_\_ feet

**Rear Property Line**



**Front Property Line**